Background Screening Application (BSA) Self-Administered Services (SAS)

A Tutorial

please print application and follow along

http://www.dspd.utah.gov

PURPOSE OF TUTORIAL

1. Assist in completing the application process

2. Help avoid common mistakes that can lead to the suspension of payments

3. Where to get answers to questions regarding the background screening application

WHO MUST COMPLETE A BACKGROUND SCREENING APPLICATION

- Potential employees who's employers are using the SAS model

- Relatives of consumers

WHAT DOES THE BSA ACCOMPLISH

- Checks for disqualifying criminal history
- Helps to insure the safety of DSPD clients
- Eliminates non-qualifying job applicants

BACKGROUND SCREENING APPLICATION

- In this tutorial the application has been divided into color coded sections
- We'll go through each section individually

Let's begin!

Utah-DHS-OL
July 2010

Utah Department of Human Services
Office of Licensing, Division of Services for People with Disabilities
SAS Background Screening Application

APPLICANT INSTRUCTIONS

COPIED AND FAXED FORMS WILL NOT BE ACCEPTED IT MUST BE THE ORIGINAL APPLICATION SIGNED BY THE EMPLOYEE.

This section is to be completed by the applicant. Incomplete/illegible applications will be returned. Incomplete means missing any information. Illegible means unreadable. Applications submitted without a copy of a social security card and a copy of a current valid drivers license or state identification card issued by the Division of Motor Vehicles will be returned. Please use colored ink to complete the background application (no black or light pastel colors)

APPLICANT REQUEST AND RELEASE

Legal First Name	Legal Middle Name (If no middle name, write NA)	Legal Last Name
List any other names ever used including nicknames, aliases, maiden, prior married, etc.		Social Security Number – –
Current Address		Birth Date / /
City,State,Zip		Daytime Phone ( ) –

BACKGROUND QUESTIONS

1	**Have you ever been charged with a crime by any law enforcement authority?** A crime is any unlawful activity; an act committed in violation of a law that is punishable upon conviction; any misdemeanor or felony infraction. Please disclose all criminal offenses even if it was later dismissed, you pled guilty or not guilty, entered a plea in abeyance or a diversion program, or if you are waiting to enter a plea. If you have been charged with a crime, please attach a certified court docket or other certified record (available from the court that handled your case) indicating the disposition of each charge or offense, or the status of each plea in abeyance or diversion agreement. If you previously submitted the certified court record to the Office of Licensing for background screening, please use the space below to write the charge, court, and date.	☐ Yes ☐ No
2	**Have you ever been investigated for child or adult abuse, neglect or exploitation?** If yes, please attach your written explanation of the investigation including how it started and how it ended. Provide Location (and the case number if known).	☐ Yes ☐ No
3	**In the last five years have you lived or spent six (6) or more consecutive weeks in a U.S. state other than Utah?** If yes, list each state separately and submit a fingerprint card that has been rolled by your local sheriff or police station. See back for further instructions/renewals. State: _____ FROM month/year: _____ TO month/year: _____	☐ Yes ☐ No
4	**In the last five years have you lived or spent six (6) or more consecutive weeks in a foreign country or U.S. Territory?** If yes, list each country separately and attach original or notarized copy of background check from that country. See back for further instructions/renewals. Country: _____ FROM month/year: _____ TO month/year: _____	☐ Yes ☐ No
5	**Are you the grandfather, grandmother, uncle, aunt, sibling, or child of the person to be served?**	☐ Yes ☐ No
6	**If you answered, "Yes" to question 5 above, do you want a transferable background check?** If you answer "No" on question 6, your background check will not be transferable across multiple employers and you will not be subject to a criminal background check or asked to provide fingerprint cards even if you have lived out of Utah for 6 or more consecutive weeks in the past 5 years. If you answer "Yes" to question 6, your background check will be transferable across multiple employers and you will be subject to a criminal background check and must provide fingerprint cards if you lived out of Utah for 6 or more consecutive weeks in the past 5 years.	☐ Yes ☐ No ☐ N/A

I authorize the Utah Department of Human Services, Office of Licensing, to investigate my past and present child and adult abuse, neglect and exploitation records, law enforcement, driver's license and any and all information which may be pertinent to my application according to Utah Code 62A-2-120, 121, 122, and Rule 501-14. I authorize the release of any and all information to the Office of Licensing. I release the Department of Human Services from any damages resulting from the Department of Human Services furnishing such information to authorized agencies. I certify that my answers contain no misrepresentation or falsification, and that the information is true and complete to the best of my knowledge. **I understand that providing false or inaccurate information or failing to provide information may result in my background screening being delayed or denied.**

Applicant Signature	Date	Name and Client ID # of the person receiving services

*******AGENCY/LICENSED PROGRAM REQUEST AND RELEASE*******

Name of Agency, Licensee or DHS Licensor: _____

Address: _____ City: _____ State: _____ Zip Code: _____ Phone number: _____

Does the applicant provide foster/proctor care services? ☐No **IF YES DO NOT USE THIS FORM**

I certify that I have inspected a copy of the applicant's state driver's license or state identification card, it does not appear to have been forged or altered, and it appears to be identical to the original. I have reviewed this completed application and it contains no misrepresentation or falsification to the best of my knowledge.

_____ _____

Signature of Authorized Agency or Program Representative or DHS Licensor — Printed Name of Authorized Agency or Program Representative or DHS Licensor

DO NOT WRITE OR MARK BELOW. THIS SPACE IS FOR CBS USE ONLY. STAMPS BELOW DESIGNATE APPROVAL

LIVE SCAN	62A-2-120	LIC-C	MIS-A	DATE STAMP
DATE / / BILLING CODE B1578 TECHNICIAN SIGNATURE				

CONSUMER INFORMATION

Name of the 1st person receiving services	Client ID# of the person receiving services
Current Address	Phone number of the person receiving services ( ) –
City, State, Zip	Fiscal Agent (Circle One) Morning Star Acumen Leonard Consulting
Person to contact if there is a problem with this application	Daytime Phone ( ) –

If you work for more than one consumer and/or provider agency and you want your approval to work to transfer across consumers and provider agencies please list additional consumers and provider agencies that you work for below

ADDITIONAL EMPLOYEE INFORMATION NEEDED FOR TRANSFERABLE BACKGROUND CHECK APPROVAL

2nd Consumer and Client ID # OR Provider Agency Name
3rd Consumer and Client ID # OR Provider Agency Name
4th Consumer and Client ID # OR Provider Agency Name
5th Consumer and Client ID # OR Provider Agency Name

ADDITIONAL INSTRUCTIONS FOR OUT-OF- STATE AND COUNTRY

Fingerprint card for out-of-state:

New Applicant

- Applicants that require a fingerprint card will need to have them completed at a police station or sheriff station.
- Applicants may also go to one of the approved Office of Licensing's "Live Scan" location for electronic fingerprinting.

Be sure to bring the following items with you to the "Live Scan" location; application, prior approval for billing, copy of applicant's driver's license and social security card.

Renewal- If "Live Scan" or fingerprint cards were submitted with your previous background application and you have not left the State of Utah for (6) or more consecutive weeks since that submission, it is not necessary to resubmit live scan or fingerprint cards. Please indicate on the application that the forms are already on file. If you have left the State of Utah for (6) or more consecutive weeks since your last submission, new fingerprint card information is needed.

Documentation for out-of-country residency:

New Applicant

An applicant who has lived outside of the United States (including Puerto Rico, American Samoa, U.S. Virgin Islands and Guam) within the last five years for more than six (6) consecutive weeks will need to attach one of the following:

- A criminal background check from each of the countries they have lived in. (Contact that country's embassy in Washington D.C. for instructions on how to obtain a criminal background check from that country.)
- If the applicant was serving in the U.S. military or in a full-time ecclesiastical service they can attach the following instead of the criminal report from the country.
  -An original letter or certificate from the U.S. military or full-time ecclesiastical foundation stating that they were released without any criminal history. The letter will also need to include dates of service and area in which they lived. If applicant wants to keep the original letter of release or certificate they will need to take the original document along with a copy of the document to a notary public officer to be notarized. Then attach the notarized copy to the application. The applicant can also bring the original letter of release or certificate to the Office of Licensing located at 195 N 1950 W in Salt Lake City, Utah to be validated. This does not apply if the applicant is the grandfather, grandmother, uncle, aunt, sibling, or child of the person receiving direct services.

Renewal- If out-of-country documentation was submitted with the previous application, please attach supporting documentation

Mail complete applications and contact the appropriate fiscal agent for questions.

ACUMEN	LEONARD CONSULTING, LLC	MORNING STAR
ADDRESS	1059 E 900 S	PO BOX 9323
CITY UT ZIP	SLC UT 84105	SLC UT 84109
888-221-7014	801-359-4698	888-657-0874

COLOR CODE KEY

- Applicant Instructions- Items to know for filling out the application.
- Applicant Request and Release- Identifying information that is used to investigate the applicants past history.
- Background Questions- Allows the applicant to disclose past history and out-of-state and country history. If there is past history additional paperwork is required.
- Agency/Licensed Program Request and Release- The Divisions approval of a complete application.
- Consumer Information- Information needed to link applicant to the consumer.
- Additional Information needed for transferable BSA- If applicant is working for more than one consumer and/or provider agency and would like to have their approval transfer they will need to list them in this area.
- Additional Instructions- These have been added for those employees that have lived out-of-state and/or country.

Utah-DHS-OL
July 2010

Utah Department of Human Services
Office of Licensing, Division of Services for People with Disabilities
SAS Background Screening Application

APPLICANT INSTRUCTIONS

COPIED AND FAXED FORMS WILL NOT BE ACCEPTED IT MUST BE THE ORIGINAL APPLICATION SIGNED BY THE EMPLOYEE.
This section is to be completed by the applicant. Incomplete/illegible applications will be returned. Incomplete means missing any information. Illegible means unreadable. Applications submitted without a copy of a social security card and a copy of a current valid drivers license or state identification card issued by the Division of Motor Vehicles will be returned. Please use colored ink to complete the background application (no black or light pastel colors)

APPLICANT REQUEST AND RELEASE

Legal First Name	Legal Middle Name (If no middle name, write NA)	Legal Last Name
List any other names ever used including nicknames, aliases, maiden, prior married, etc.		Social Security Number – –
Current Address		Birth Date / /
City,State,Zip		Daytime Phone ( ) –

BACKGROUND QUESTIONS

1	**Have you ever been charged with a crime by any law enforcement authority?** A crime is any unlawful activity; an act committed in violation of a law that is punishable upon conviction; any misdemeanor or felony infraction. Please disclose all criminal offenses even if it was later dismissed, you pled guilty or not guilty, entered a plea in abeyance or a diversion program, or if you are waiting to enter a plea. If you have been charged with a crime, please attach a certified court docket or other certified record (available from the court that handled your case) indicating the disposition of each charge or offense, or the status of each plea in abeyance or diversion agreement. If you previously submitted the certified court record to the Office of Licensing for background screening, please use the space below to write the charge, court, and date.	☐ Yes ☐ No
2	**Have you ever been investigated for child or adult abuse, neglect or exploitation?** If yes, please attach your written explanation of the investigation including how it started and how it ended. Provide Location (and the case number if known).	☐ Yes ☐ No
3	**In the last five years have you lived or spent six (6) or more consecutive weeks in a U.S. state other than Utah?** If yes, list each state separately and submit a fingerprint card that has been rolled by your local sheriff or police station. See back for further instructions/renewals. State: _____ FROM month/year: _____ TO month/year: _____	☐ Yes ☐ No
4	**In the last five years have you lived or spent six (6) or more consecutive weeks in a foreign country or U.S. Territory?** If yes, list each country separately and attach original or notarized copy of background check from that country. See back for further instructions/renewals. Country: _____ FROM month/year: _____ TO month/year: _____	☐ Yes ☐ No
5	**Are you the grandfather, grandmother, uncle, aunt, sibling, or child of the person to be served?**	☐ Yes ☐ No
6	**If you answered, "Yes" to question 5 above, do you want a transferable background check?** If you answer "No" on question 6, your check will not be transferable across multiple employers and you will not be subject to a criminal background check or asked to provide fingerprint cards even if you have lived out of Utah for 6 or more consecutive weeks in the past 5 years. If you answer "Yes" to question 6, your check will be transferable across multiple employers and you will be subject to a criminal background check and must provide fingerprint cards if you lived out of Utah for 6 or more consecutive weeks in the past 5 years.	☐ Yes ☐ No ☐ N/A

I authorize the Utah Department of Human Services, Office of Licensing, to investigate my past and present child and adult abuse, neglect and exploitation records, law enforcement, driver's license and any and all information which may be pertinent to my application according to Utah Code 62A-2-120, 121, 122, and Rule 501-14. I authorize the release of any and all information to the Office of Licensing. I release the Department of Human Services from any damages resulting from the Department of Human Services furnishing such information to authorized agencies. I certify that my answers contain no misrepresentation or falsification, and that the information is true and complete to the best of my knowledge. **I understand that providing false or inaccurate information or failing to provide information may result in my background screening being delayed or denied.**

Applicant Signature	Date	Name and Client ID # of the person receiving services

*******AGENCY/LICENSED PROGRAM REQUEST AND RELEASE*******

Name of Agency, Licensee or DHS Licensor: **DIVISION OF SERVICES FOR PEOPLE WITH DISABILITIES**

Address: _____ City: _____ State: _____ Zip Code: _____ Phone number: _____

Does the applicant provide foster/proctor care services? ■No **IF YES DO NOT USE THIS FORM**

I certify that I have inspected a copy of the applicant's state driver's license or state identification card, it does not appear to have been forged or altered, and it appears to be identical to the original. I have reviewed this completed application and it contains no misrepresentation or falsification to the best of my knowledge.

Signature of Authorized Agency or Program Representative or DHS Licensor

Printed Name of Authorized Agency or Program Representative or DHS Licensor

DO NOT WRITE OR MARK BELOW. THIS SPACE IS FOR CBS USE ONLY. STAMPS BELOW DESIGNATE APPROVAL

LIVE SCAN	62A-2-120	LIC-C	MIS-A	DATE STAMP
DATE / / BILLING CODE B1578 TECHNICIAN SIGNATURE				

SEE BACK FOR FURTHER INSTRUCTIONS PAGE 1 OF 2

CONSUMER INFORMATION

Name of the 1st person receiving services	Client ID# of the person receiving services
Current Address	Phone number of the person receiving services ( ) –
City, State, Zip	Fiscal Agent (Circle One) Morning Star Acumen Leonard Consulting
Person to contact if there is a problem with this application	Daytime Phone ( ) –

If you work for more than one consumer and/or provider agency and you want your approval to work to transfer across consumers and provider agencies please list additional consumers and provider agencies that you work for below

ADDITIONAL EMPLOYEE INFORMATION NEEDED FOR TRANSFERABLE BACKGROUND CHECK APPROVAL
2nd Consumer and Client ID # OR Provider Agency Name
3rd Consumer and Client ID # OR Provider Agency Name
4th Consumer and Client ID # OR Provider Agency Name
5th Consumer and Client ID # OR Provider Agency Name

ADDITIONAL INSTRUCTIONS FOR OUT-OF- STATE AND COUNTRY

Fingerprint card for out-of-state:

New Applicant

- Applicants that require a fingerprint card will need to have them completed at a police station or sheriff station.
- Applicants may also go to one of the approved Office of Licensing's "Live Scan" location for electronic fingerprinting.

Be sure to bring the following items with you to the "Live Scan" location; application, prior approval for billing, copy of applicant's driver's license and social security card.

Renewal- If "Live Scan" or fingerprint cards were submitted with your previous background application and you have not left the State of Utah for (6) or more consecutive weeks since that submission, it is not necessary to resubmit live scan or fingerprint cards. Please indicate on the application that the forms are already on file. If you have left the State of Utah for (6) or more consecutive weeks since your last submission, new fingerprint card information is needed.

Documentation for out-of-country residency:

New Applicant

An applicant who has lived outside of the United States (including Puerto Rico, American Samoa, U.S. Virgin Islands and Guam) within the last five years for more than six (6) consecutive weeks will need to attach one of the following:

- A criminal background check from each of the countries they have lived in. (Contact that country's embassy in Washington D.C. for instructions on how to obtain a criminal background check from that country.)
- If the applicant was serving in the U.S. military or in a full-time ecclesiastical service they can attach the following instead of the criminal report from the country.
  -An original letter or certificate from the U.S. military or full-time ecclesiastical foundation stating that they were released without any criminal history. The letter will also need to include dates of service and area in which they lived. If applicant wants to keep the original letter of release or certificate they will need to take the original document along with a copy of the document to a notary public officer to be notarized. Then attach the notarized copy to the application. The applicant can also bring the original letter of release or certificate to the Office of Licensing located at 195 N 1950 W in Salt Lake City, Utah to be validated. This does not apply if the applicant is the grandfather, grandmother, uncle, aunt, sibling, or child of the person receiving direct services.

Renewal- If out-of-country documentation was submitted with the previous application, please attach supporting documentation

Mail complete applications and contact the appropriate fiscal agent for questions.

ACUMEN	LEONARD CONSULTING, LLC	MORNING STAR
ADDRESS	1059 E 900 S	PO BOX 9323
CITY UT ZIP	SLC UT 84105	SLC UT 84109
888-221-7014	801-359-4698	888-657-0874

APPLICANT INSTRUCTIONS

Utah-DHS-OL
July 2010

Utah Department of Human Services,
Office of Licensing, Division of Services for People with Disabilities
SAS Background Screening Application

APPLICANT INSTRUCTIONS

COPIED AND FAXED FORMS WILL NOT BE ACCEPTED IT MUST BE THE ORIGINAL APPLICATION SIGNED BY THE EMPLOYEE

This section is to be completed by the applicant. Incomplete/illegible applications will be returned. Incomplete means missing any information. Illegible **means unreadable. Applications submitted without a copy of a social security card and a copy of a current valid drivers license or state identification card issued by the Division of Motor Vehicles will be returned. Please use colored ink (no black or light pastel colors)**

APPLICANT REQUEST AND RELEASE

APPLICANT REQUEST AND RELEASE		
Legal First Name	Legal Middle Name (If no middle name, write NA)	Legal Last Name
List any other names ever used including nicknames, aliases, maiden, prior married, etc.		Social Security Number – –
Current Address		Birth Date / /
City,State,Zip		Daytime Phone ( ) –

BACKGROUND QUESTIONS

BACKGROUND QUESTIONS		
1	**Have you ever been charged with a crime by any law enforcement authority?** A crime is any unlawful activity; an act committed in violation of a law that is punishable upon conviction; any misdemeanor or felony infraction. Please disclose all criminal offenses even if it was later dismissed, you pled guilty or not guilty, entered a plea in abeyance or a diversion program, or if you are waiting to enter a plea. If you have been charged with a crime, please attach a certified court docket or other certified record (available from the court that handled your case) indicating the disposition of each charge or offense, or the status of each plea in abeyance or diversion agreement. If you previously submitted the certified court record to the Office of Licensing for background screening, please use the space below to write the charge, court, and date.	**Yes No**
2	**Have you ever been investigated for child or adult abuse, neglect or exploitation?** **If yes**, please attach your written explanation of the investigation including how it started and how it ended. Provide Location (and the case number if known).	**Yes No**
3	**In the last five years have you lived or spent six (6) or more consecutive weeks in a U.S. state other than Utah?** **If yes**, list each state separately and submit a fingerprint card that has been rolled by your local sheriff or police station. See back for further instructions/renewals. State: _____ FROM month/year: _____ TO month/year: _____	**Yes No**
4	**In the last five years have you lived or spent six (6) or more consecutive weeks in a foreign country or U.S. Territory?** **If yes**, list each country separately and attach original or notarized copy of background check from that country. See back for further instructions/renewals. Country: _____ FROM month/year: _____ TO month/year: _____	**Yes No**
5	**Are you the grandfather, grandmother, uncle, aunt, sibling, or child of the person to be served?**	**Yes No**
6	**If you answered, "Yes" to question 5 above, do you want a transferable background check?** If you answer "No" on question 6, your check will not be transferable across multiple employers and you will not be subject to a criminal background check or asked to provide fingerprint cards even if you have lived out of Utah for 6 or more consecutive weeks in the past 5 years. If you answer "Yes" to question 6, your check will be transferable across multiple employers and you will be subject to a criminal background check and must provide fingerprint cards if you lived out of Utah for 6 or more consecutive weeks in the past 5 years.	**Yes No** NA

I authorize the Utah Department of Human Services, Office of Licensing, to investigate my past and present child and adult abuse, neglect and exploitation records, law enforcement, driver's license and any and all information which may be pertinent to my application according to Utah Code 62A-2-120, 121, 122, and Rule 501-14. I authorize the release of any and all information to the Office of Licensing. I release the Department of Human Services from any damages resulting from the Department of Human Services furnishing such information to authorized agencies. I certify that my answers contain no misrepresentation or falsification, and that the information is true and complete to the best of my knowledge. **I understand that providing false or inaccurate information or failing to provide information may result in my background screening being delayed or denied.**

Applicant Signature	Date	Name and Client ID # of the person receiving services

AGENCY/LICENSED PROGRAM REQUEST AND RELEASE

********AGENCY/LICENSED PROGRAM REQUEST AND RELEASE********

Name of Agency, Licensee or DHS Licensor: **Division of Services for People with Disabilities**

Address: **195 W 1950 W** City: **Salt Lake City** State: **Utah** Zip Code: **84116** Phone number: **(801) 538-4157**

Does the applicant provide foster/proctor care services? ■No **IF YES DO NOT USE THIS FORM**

I certify that I have inspected a copy of the applicant's state driver's license or state identification card, it does not appear to have been forged or altered, and it appears to be identical to the original. I have reviewed this completed application and it contains no misrepresentation or falsification to the best of my knowledge.

_____ **CATHY DAVIS, DSPD Background Screening Technician**

Signature of Authorized Agency or Program Representative or DHS Licensor — Printed Name of Authorized Agency or Program Representative or DHS Licensor

DO NOT WRITE OR MARK BELOW. THIS SPACE IS FOR CBS USE ONLY. STAMPS BELOW DESIGNATE APPROVAL

LIVE SCAN	62A-2-120	LIC-C	MIS-S	DATE STAMP
DATE / / BILLING CODE TECHNICIAN SIGNATURE				

SEE BACK FOR FURTHER INSTRUCTIONS PAGE 1 OF 2

CONSUMER INFORMATION

CONSUMER INFORMATION	
Name of the person receiving services	Client ID# of the person receiving services
Current Address	Phone number of the person receiving services ( ) -
City, State, Zip	Fiscal Agent (Check One) Morning Star Acumen Leonard Consulting
Person to contact if there is a problem with this application	Daytime Phone ( ) -

ADDITIONAL INFORMATION NEEDED FOR TRANSFERABLE BSA

ADDITIONAL EMPLOYEE INFORMATION NEEDED FOR TRANSFERABLE BACKGROUND CHECK APPROVAL
2nd Consumer and client # OR Provider Agency Name
3rd Consumer and client # OR Provider Agency Name
4th Consumer and client # OR Provider Agency Name
5th Consumer and client # OR Provider Agency Name

ADDITIONAL INSTRUCTIONS FOR OUT-OF-STATE AND COUNTRY

ADDITIONAL INSTRUCTIONS FOR OUT-OF- STATE AND COUNTRY

Fingerprint card for out-of-state:

New Applicant

- Applicants that require a fingerprint card will need to have them completed at a police station or sheriff station.
- Applicants may also go to one of the approved Office of Licensing's "Live Scan" location for electronic fingerprinting.

Be sure to bring the following items with you to the "Live Scan" location; application, prior approval for billing, copy of applicant's driver's license and social security card.

Renewal- If "Live Scan" or fingerprint cards were submitted with your previous background application and you have not left the State of Utah for (6) or more consecutive weeks since that submission, it is not necessary to resubmit live scan or fingerprint cards. Please indicate on the application that the forms are already on file. If you have left the State of Utah for (6) or more consecutive weeks since your last submission, new fingerprint card information is needed.

Documentation for out-of-country residency:

New Applicant

An applicant who has lived outside of the United States (including Puerto Rico, American Samoa, U.S. Virgin Islands and Guam) within the last five years for more than six (6) consecutive weeks will need to attach one of the following:

- A criminal background check from each of the countries they have lived in. (Contact that country's embassy in Washington D.C. for instructions on how to obtain a criminal background check from that country.
- If the applicant was serving in the U.S. military or in a full-time ecclesiastical service they can attach the following instead of the criminal report from the country.

-An original letter or certificate from the U.S. military or full-time ecclesiastical foundation stating that they were released without any criminal history. The letter will also need to include dates of service and area in which they lived. If applicant wants to keep the original letter of release or certificate they will need to take the original document along with a copy of the document to a notary public officer to be notarized. Then attach the notarized copy to the application. The applicant can also bring the original letter of release or certificate to the Office of Licensing located at 120 North 200 West in Salt Lake City, Utah to be validated. This does not apply if the applicant is the grandfather, grandmother, uncle, aunt, sibling, or child of the person receiving direct services.

Renewal- If out-of-country documentation was submitted with the previous application, please attach supporting documentation.

IF YOU STILL HAVE QUESTIONS AND WHERE TO SEND THE BSA

Mail complete applications and contact the appropriate fiscal agent for questions.

ACUMEN
PO BOX 539
OREM UT 84059
888-221-7014

LEONARD CONSULTING, LLC
1059 E 900 S
SLC UT 84105
801-359-4698

MORNING STAR
PO BOX 9323
SLC UT 84109
888-657-0874